

# CHRONIC PAIN MANAGEMENT IN RURAL POPULATIONS

A HEAL INITIATIVE

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Concept Developed in Collaboration with NINR Staff and HEAL Clinical Pain Management Workgroup



National Institute  
of Nursing Research

Co-sponsor: NCCIH

# OPIOID USE DISPARITIES IN RURAL POPULATIONS



ASPE Research Brief

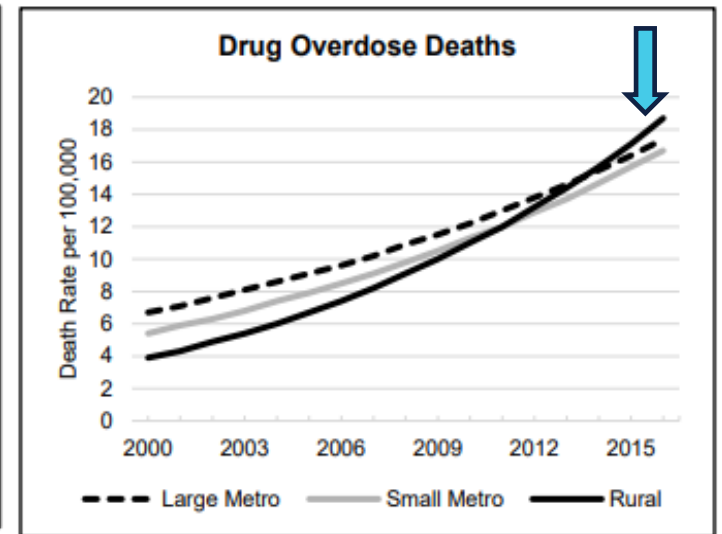
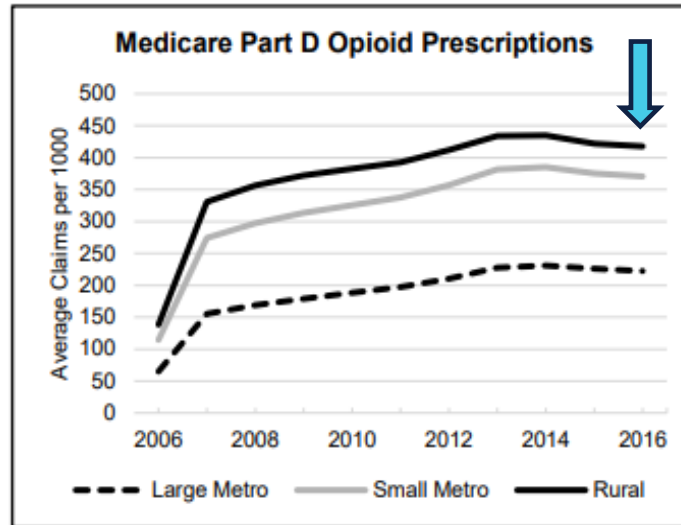
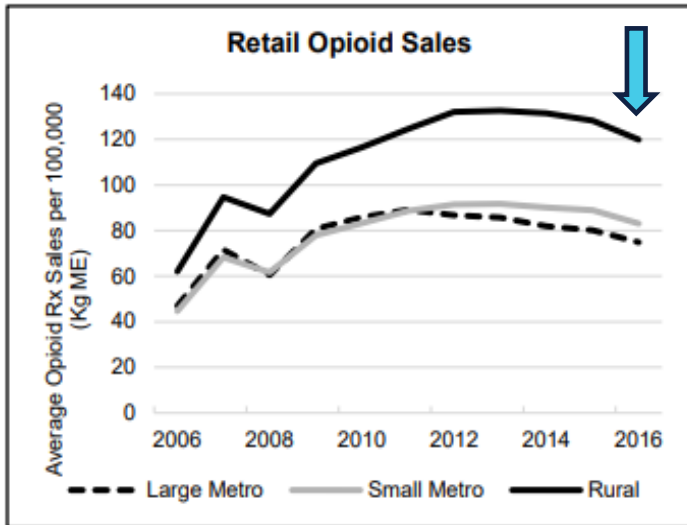
Office of the Assistant Secretary for Planning and Evaluation

U.S. Department of Health and Human Services

## THE OPIOID CRISIS AND ECONOMIC OPPORTUNITY: GEOGRAPHIC AND ECONOMIC TRENDS

By Robin Ghertner and Lincoln Groves, Ph.D. (2018)

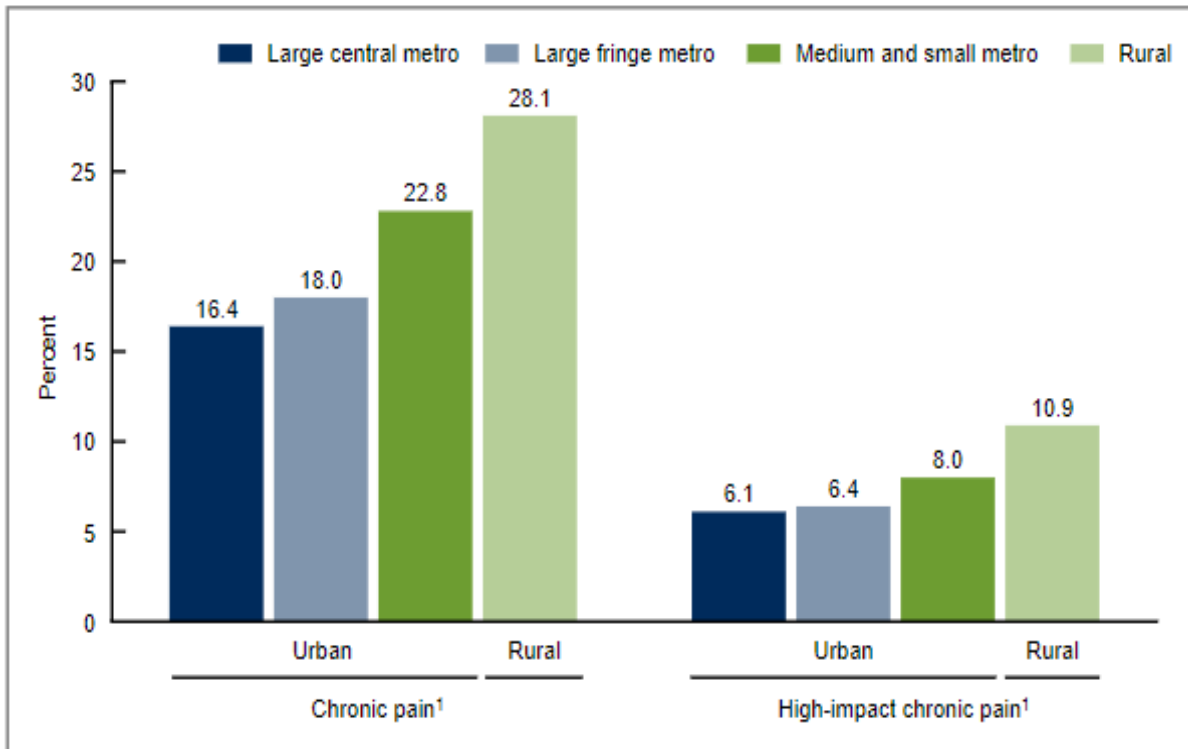
Figure 3. Measures of Substance Use and Opioid Prevalence, by Urbanicity



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# PAIN MANAGEMENT DISPARITIES IN RURAL POPULATIONS

Figure 4. Percentage of adults aged 18 and over with chronic pain and high-impact chronic pain in the past 3 months, by urbanization level: United States, 2019



<sup>1</sup>Significant quadratic trend by urbanization level ( $p < 0.05$ ).

- **Health challenges in rural areas** (From AHRQ Chartbook on Rural Healthcare, 2021)
  - Larger percentage adults over age 65 (17.5% vs 13.8%)
  - Higher poverty rate (15.3% vs 11.9%)
  - Lower per capita income (\$42,993 vs \$59,693)
  - Higher prevalence adults with multiple chronic conditions (34.8% vs 26.1%)
  - Greater challenges accessing adequate health care
- **Rural residents more likely to be prescribed opioid analgesics for pain management**
- **Rural residents less likely to use self-management interventions for pain management** (R01 NR012450; Eaton, et al, 2018)

## RESEARCH GAP

Need for a coordinated approach to:

identify and reduce barriers, and

accelerate implementation of evidence-based chronic pain care in rural populations,

in order to:

optimize health,

address disparities, and

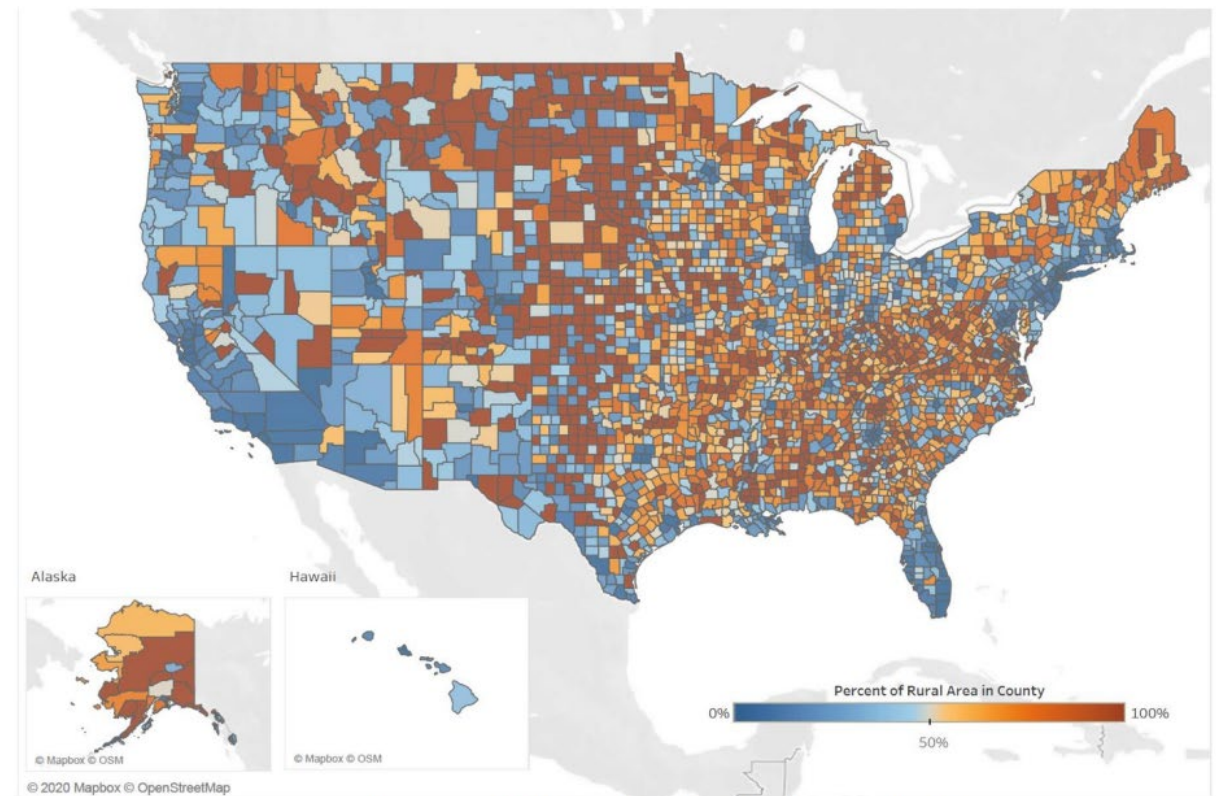
advance health equity.



## PURPOSE

- To accelerate implementation of evidence-based non-opioid interventions for chronic pain management in rural and remote populations, to address the disparities in these populations.
- The initiative focuses on implementation in community settings and building partnerships between investigators, local providers and community organizations.

**Rurality by County in United States, 2019**



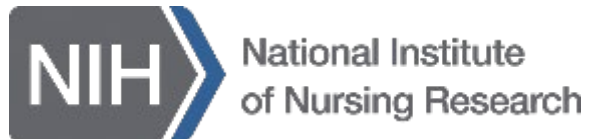
*Source: Federal Communications Commission 2019 Fixed Broadband Deployment datafile.*

*Notes: Rurality is defined by decennial census population at the county-level.*

# MECHANISM AND SUPPORT



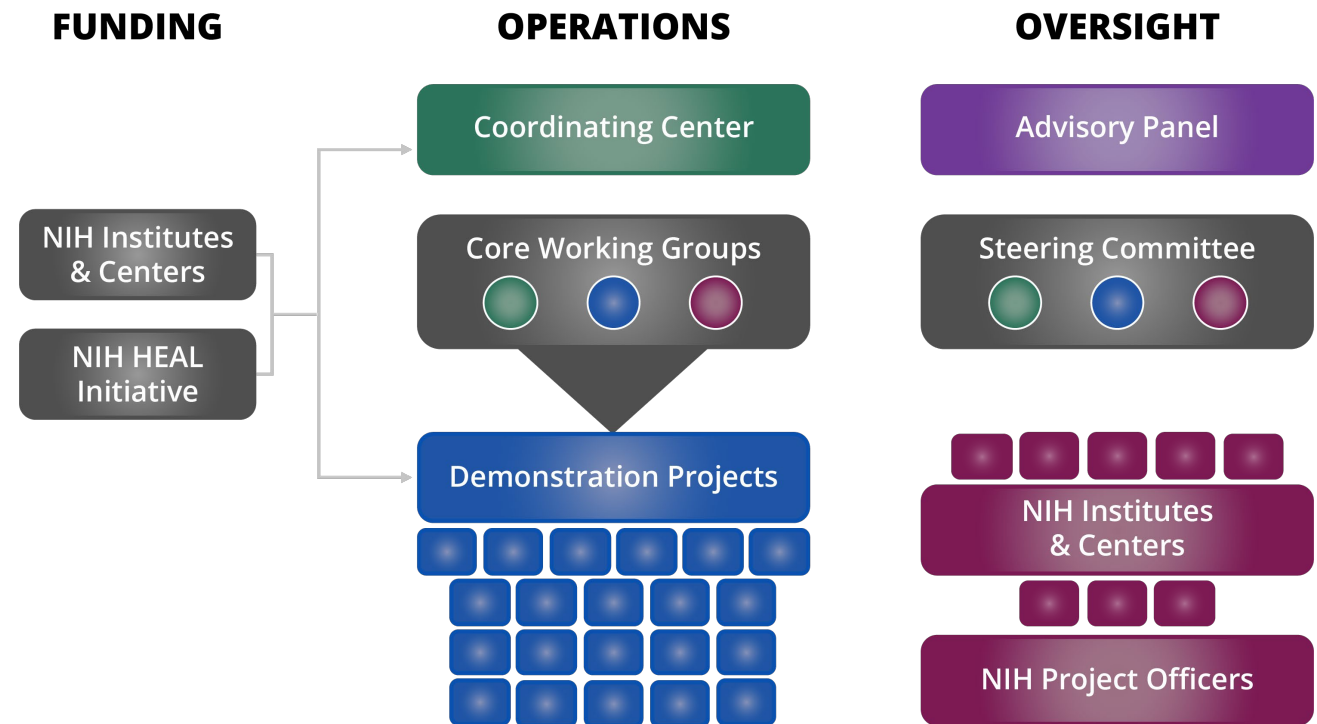
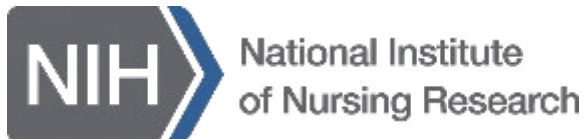
FY	Dollars
FY 2023	5.7M
FY 2024	10.8M
FY 2025	10.8M
FY 2026	10.8M
FY 2027	10.8M
TOTAL	48.9M



- **UG3/UH3 Phased Cooperative Agreement**
  - **UG3 phase**
    - Milestone driven
    - Building community partnerships
  - **UH3 phase**
    - Implementation in community
- **HEAL Funding**

# COLLABORATION

- Inclusion in
  - **Pragmatic and Implementation Studies for the Management of Pain to Reduce Opioid Prescribing (PRISM) Coordinating Center**
  - **NIH Pragmatic Trials Collaboratory**
- **Collaborating Institutes and Centers:**
  - Potentially: NCI, NCATS, NIA, NIAAA, NIAMS, NICHD, NIDCR, NIDDK, NIMHD, NINDS, OBSSR, ODP, HRSA



# RESEARCH INTERESTS

- Pragmatic, implementation or hybrid effectiveness-implementation studies
- Projects with at least one health care system or organizational partner
- Plans for sustainability of intervention beyond award period
- Encourage multi-level interventions with systemic implementation strategies
- Encourage utilization of existing resources (CTSAs, practice-based research networks, FQHCs, etc.)



## EXAMPLES

### ■ Interventions

- In rural and/or remote health care settings including primary care, acute care, home health, and other settings where pain management occurs
- That address access to non-opioid pain management for rural and/or remote populations
- That address health equity in decision-making for pain assessment, management and follow up

### ■ Pain conditions

- Migraines and other chronic headaches
- Pain from arthritis
- Low back pain
- Pain from injuries requiring health care intervention
- Perioperative pain
- Severe dental pain
- Gynecological pain
- Neuropathies and neuropathic pain
- Cancer pain or chronic pain in cancer survivors
- Pain in one or multiple chronic conditions such as lupus, fibromyalgia, diabetes mellitus, chronic renal disease, etc.

# CONCLUSION

This concept addressing chronic pain in rural populations

- **Aligns with NINR guiding principles** of advancing health equity and diversity, tackling today's pressing health challenges, and discovering solutions to optimize health across clinical and community settings
- **Aligns with HEAL goals** of improving chronic pain management, and appropriate prescribing of analgesics, including opioids across populations
- **Addresses a unique programmatic need** focusing on the challenges of implementation in rural and remote populations, which has not been directly addressed in previous HEAL initiatives

